

Faculty Professional Development Information and Procedures



Please review the following information prior to completing the application. Approval of applications is contingent upon availability of funds. Submit your application to your Division Dean for review and approval **thirty (30) days** before the event. All forms are available online at <http://www.canadacollege.edu/professionaldevelopmen/faculty.php>

Purpose:

To update, retrain, and broaden faculty expertise to meet current and future needs of our students in accordance with college priorities. For more information, please refer to the AFT contract, Article 13, Professional Development Program.

Deadlines and Eligibility:

- **Conference/Short Term** applications are accepted by **May 12, 2017** and available to all faculty.
- **Long Term** applications for Spring 2018 projects are accepted by **October 13, 2017** and for Fall 2017 semester projects are accepted by **March 3, 2017**. This is available to Full-Time faculty members.
- **Extended Leave (Sabbaticals)** proposals are due **March 1** and are available to Full-Time faculty.

Covered Expenses:

1. Registration Fee
2. Faculty Replacement
3. Tuition Fee
4. Travel expenses (airfare, *mileage, car rental and/or shuttle/bus/taxi fare, lodging, meals, tolls and parking charges)

Proof of estimated covered expenses MUST be included in the application.

*Mileage calculation must be included in your application and is estimated as roundtrip from Cañada College OR home, whichever is closer to conference site. Please use GoogleMaps.

*** Professional Development travel funds will cover a maximum of \$2,500.00 per year, per applicant.**

* Non-attendance to the conference/workshop will not be reimbursed.

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Submit your **ti** to your Division Dean 30 days or more before the conference. It will be forwarded to the Office of Instruction for the Professional Development Committee's review. The committee's decision will be sent electronically to the e-mail address provided on your application.

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Include an information flyer to show proof of conference, fee schedule, and estimated expenses listed under Covered Expenses.

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Compose at least 1 page addressing the topics below and attach to your application:

- A) Benefit to the College;
- B) Enhancement to existing course or program area (a plan for sharing the results of the activity);
- C) Personal enrichment.

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Address the topics below and attach to your application:

- A) An outline of the planned project, program, activity or work experience including a statement of purpose and objectives;
- B) A description of the activities involved;
- C) Enhancement to existing course or program area (a plan for sharing the results of the activity).

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Form must be completed if/when traveling outside of CA or requesting a fund advance. Submit form 30 days prior to the event. Click here for the form.

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- If you are applying for Basic Skills funds, please add a brief paragraph to your proposal explaining how your project relates to basic skills.
- You must contact the Basic Skills Committee and Academic Senate for the supplemental fund to inform them that an application is forthcoming.

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Submit your **ti** along with the required documents listed below to your Division Dean within 10 days after the conference. It will then be forwarded to the Office of Instruction to process the reimbursement. You will be notified when your reimbursement check is available.

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Include original receipts, and proof of payment (ex: credit/debit card statement or copy of front and back side of check). If you receive an advance, state the amount advanced to you. Click here for the form.

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This is **k-j y&-** for Long Term projects; OPTIONAL for Short Term projects. Submit this report to your Division Dean. Click here for the form.

* June conference dates have restrictions; please contact Professional Development Chair.

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If you attend the same conference annually, you should apply as soon as you receive information about the conference.

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If you have questions, please contact Lisa Palmer, Professional Development Committee Chair at (650) 306-3221 or palmer@smccd.edu Professional Development is governed by the AFT contract; please refer to your contract or view it online at <http://www.aft1493.org>



Professional Development Application

Please review the information and procedures page before completing this application. Submit your complete application, including personal statement and proof of conference expenses to your Division Dean for review and approval thirty (30) days before the conference/workshop. Attention to thorough completion of application will expedite the approval process.

Applicant Information

Name:		
G #:		
Phone Ext:		
E-mail:		
Division:		
Department:		
Faculty Status:	FT	Adjunct

Requesting funds from:

- Professional Development
- Conference Advance form
- Basic Skills
- Academic Senate

Application Type:

- Short Term
- Long Term
- Extended Leave (Sabbatical)

Conference Information

Conference Title:	Conference Date:
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Conference Location (City, State):

Conference Expenses (include proof of estimated expenses):

Registration Fee:

Travel (Airfare/Train/Bus/Shuttle/Taxi/Lodging/*Mileage/Meals):

*Not to exceed \$2,500 per applicant, per academic year. *Mileage calcuation is the number of miles x \$0.535*

Tuition Fee:

Total Expenses:

I have read and understand the procedures of the professional development funding application, including the SMCCCD policies on travel outline [here](#). I understand that I need to submit all of the following:

1. Application, 2. Personal Statement, and 3. Statement of Conference Expense form.

I take responsibility for the fees accrued beyond those stated on this application.

I agree to the terms and conditions in submitting this application.

Signature:

Today's Date:

Division Dean

A. I recommend APPROVAL of this application.
B. I DO NOT recommend approval of this application.
C. Instructor WILL NOT be replaced.
D. Instructor WILL BE replaced and the following is the replacement cost:

Number of hours: at Lecture/Non-Instructional Rate of =
Number of hours: at Lab Rate of =
Number of OFFICE hours: at Special Rate of =
Estimated benefits (salary x 8.1 %) =
Total Cost

Units Release Time: for semester/year. Name of substitute:

Comments/relevance of application to the Division:

Division Dean Signature:**Today's Date****Committee Chair****Approved****Denied**

The following expenses are approved

Registration Fee:

Travel (Airfare/Train/Bus/Shuttle/Taxi/Lodging/Mileage/Meal):

Tuition Fee:

Instructional replacement cost: Units release time:

Total Expenses:

Comments:

Committee Chair Signature:**Today's Date****College President****Approved****Denied****College President Signature:****Today's Date****Office of Instruction**

Application was received on Account to charge (FOAP)

Conference advance form included Yes Yes, for College Pres. approval only

Processed by:**Today's Date**